

City of Arnolds Park, Iowa

Petition to Change Zoning Classification

Phone: (712) 332-2341 ~ 156 N. Highway 71 ~ PO Box 437 ~ Arnolds Park, IA 51331 ~ Office Hours: 8am – 4pm

1. PREMISES LOCATION:

The undersigned is the (owner) (contract purchaser) (option purchaser) of the below described property located at (Street Address) _____
Legal Description _____ (Lot) _____ (Block) _____ (Subdivision) _____

2. APPLICATION IS MADE BY:

Name: _____ owner/developer/agent
(Please circle one)

Owners Name (if not listed above): _____

Street Address: _____

City, State, Zip: _____

Phone or Contact Number: _____

E-mail Address: _____

3. REQUEST FOR REZONING:

Current Land Use: Agriculture Residential Commercial Industrial
 Civic/Public Vacant Other: _____

Current Zoning: _____ **Lot Area:** _____

Proposed Zoning: _____ **Proposed Land Use:** _____

Statements of Justification: Describe below the responses to each of the following questions:

1. Project Description: Describe, in detail, the nature of the proposed project for which the rezoning is being requested _____

2. A statement of the reasons why the applicant feels the present zoning is no longer appropriate. _____

Site Plan Required: A site plan, identifying all proposed lots and access must be attached and made part of this petition. The site plan shall clearly show the property under consideration and ALL properties within 200 feet of the property under consideration. The property boundaries and property legal description shall be based on actual survey or legal description of record.

Surrounding Owners: Attach a list of names and addresses of ALL property owners of record within 200 feet of the property under consideration.

4. CERTIFICATION:

The undersigned applicant, by signature, indicates his/her agreement to the conditions outlined in this permit, and will adhere to the Arnolds Park Zoning Regulations. The applicant also acknowledges and certifies under oath that the foregoing information is true and correct.

Signature of Applicant/Owner/Developer (or Authorized Representative)

Date

ARNOLDS PARK PETITION TO CHANGE ZONING DISTRICT (FOR USE BY THE CITY OF ARNOLDS PARK ONLY)

This application presented by the applicant has been reviewed for compliance with the Arnolds Park Zoning Ordinance.

This petition for zoning change is: Approved Denied as presented on this date: _____

Signed: _____ Arnolds Park Zoning Administrator

Copy Sent to Applicant on: _____